

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

NOV 21 2017

Bayfield Co. Zoning Dept.

Permit #:

17-0474

Date:

12-7-17

Amount Paid:

\$300 11-28-17
\$100 12-7-17

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

| | | | | | | | | | |
|--|--|--|--|---|--------------------------------|--|--------------------------------------|---------------------------------|--------------------------------|
| TYPE OF PERMIT REQUESTED → | | <input type="checkbox"/> LAND USE | | <input type="checkbox"/> SANITARY | <input type="checkbox"/> PRIVY | <input type="checkbox"/> CONDITIONAL USE | <input type="checkbox"/> SPECIAL USE | <input type="checkbox"/> B.O.A. | <input type="checkbox"/> OTHER |
| Owner's Name: | | Mailing Address: | | City/State/Zip: | | Telephone: | | | |
| Douglas N. Schneider Living Trust | | 1730 W. Buckeye | | Frederick, IL 61032 | | | | | |
| Address of Property: | | City/State/Zip: | | | | Cell Phone: 815 275 4142 | | | |
| 3985 E. Robinson Lk. Rd. | | | | | | | | | |
| Contractor: | | Contractor Phone: | | Plumber: | | Plumber Phone: | | | |
| Authorized Agent: (Person Signing Application on behalf of Owner(s)) | | Agent Phone: | | Agent Mailing Address (include City/State/Zip): | | Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| PROJECT LOCATION | | Legal Description: (Use Tax Statement) | | Tax ID# (4-5 digits) | | Recorded Deed (i.e. # assigned by Register of Deeds) | | | |
| NE 1/4, SD4 1/4 T44N - R09W | | Gov't Lot 2 | | Lot(s) | | CSM | | Vol & Page 1026 P 990 | |
| Section 4, Township 44 N, Range 9 W | | Town of: Barnes | | Lot Size | | Acreage .910 | | | |

| | | | | | |
|--|---|---------------------|---|--|--|
| X Shoreland → | <input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? | If yes---continue → | Distance Structure is from Shoreline : _____ feet | Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| | X Is Property/Land within 1000 feet of Lake, Pond or Flowage | If yes---continue → | Distance Structure is from Shoreline : 15 feet | | |
| <input type="checkbox"/> Non-Shoreland | | | | | |

| | | | | | | |
|--|--|---|--|--|---|--|
| Value at Time of Completion * include donated time & material | Project | # of Stories and/or basement | Use | # of bedrooms | What Type of Sewer/Sanitary System Is on the property? | Water |
| \$ 3000 | <input checked="" type="checkbox"/> New Construction | <input checked="" type="checkbox"/> 1-Story | <input type="checkbox"/> Seasonal | <input type="checkbox"/> 1 | <input type="checkbox"/> Municipal/City | <input type="checkbox"/> City |
| | <input type="checkbox"/> Addition/Alteration | <input type="checkbox"/> 1-Story + Loft | <input checked="" type="checkbox"/> Year Round | <input type="checkbox"/> 2 | <input type="checkbox"/> (New) Sanitary Specify Type: _____ | <input checked="" type="checkbox"/> Well |
| | <input type="checkbox"/> Conversion | <input type="checkbox"/> 2-Story | <input type="checkbox"/> _____ | <input type="checkbox"/> 3 | <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: Trench | <input type="checkbox"/> _____ |
| | <input type="checkbox"/> Relocate (existing bldg) | <input type="checkbox"/> Basement | | | <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) | |
| | <input type="checkbox"/> Run a Business on Property | <input type="checkbox"/> No Basement | | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Portable (w/service contract) | |
| | <input type="checkbox"/> _____ | <input type="checkbox"/> Foundation | | | <input type="checkbox"/> Compost Toilet | |
| | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | | | <input type="checkbox"/> None | |

| | | | |
|---|-------------|-----------|-------------|
| Existing Structure: (if permit being applied for is relevant to it) | Length: | Width: | Height: |
| Proposed Construction: | Length: 12' | Width: 8' | Height: 13' |

| | | | | |
|--|-------------------------------------|--|------------|----------------|
| Proposed Use | ✓ | Proposed Structure | Dimensions | Square Footage |
| X Residential Use Rec'd for Issuance NOV 27 2017 BAC 11-27 Secretarial Staff | <input type="checkbox"/> | Principal Structure (first structure on property) | (X) | |
| | <input type="checkbox"/> | Residence (i.e. cabin, hunting shack, etc.) | (X) | |
| | | with Loft | (X) | |
| | | with a Porch | (X) | |
| | | with (2 nd) Porch | (X) | |
| | | with a Deck | (X) | |
| <input type="checkbox"/> Commercial Use DEC 07 2017 Secretarial Staff | | with (2 nd) Deck | (X) | |
| | | with Attached Garage | (X) | |
| | <input type="checkbox"/> | Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities) | (X) | |
| | <input type="checkbox"/> | Mobile Home (manufactured date) _____ | (X) | |
| | <input type="checkbox"/> | Addition/Alteration (specify) _____ | (X) | |
| | <input type="checkbox"/> | Accessory Building (specify) _____ | (X) | |
| <input type="checkbox"/> Municipal Use | | Accessory Building Addition/Alteration (specify) _____ | (X) | |
| | <input type="checkbox"/> | Special Use: (explain) _____ | (X) | |
| | <input type="checkbox"/> | Conditional Use: (explain) _____ | (X) | |
| | <input checked="" type="checkbox"/> | Other: (explain) Boat house | (8 X 12) | 96 |

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Douglas N. Schneider Living Trust, Doug Schneider
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 11-13-17

Authorized Agent: _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____

Address to send permit 3985 East Robinson Lake Road, Barnes WI. 54873

Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

NEEDS \$100 IMPERVIOUS SURFACE FEE
APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (*):

(*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*):

(*) Wetlands; or (*) Slopes over 20%

See attached drawings

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) Setbacks: (measured to the closest point)

| Description | Measurement | | Description | Measurement |
|---|-------------|--|--|---|
| | | | | |
| Setback from the Centerline of Platted Road | 805 Feet | | Setback from the Lake (ordinary high-water mark) | 14'12 Feet |
| Setback from the Established Right-of-Way | 390 Feet | | Setback from the River, Stream, Creek | DNA Feet |
| | | | Setback from the Bank or Bluff | 4 Feet |
| Setback from the North Lot Line | 113 Feet | | | |
| Setback from the South Lot Line | 16-20 Feet | | Setback from Wetland | DNA Feet |
| Setback from the West Lot Line | 14'12 Feet | | 20% Slope Area on property | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Setback from the East Lot Line | 377 Feet | | Elevation of Floodplain | DNA Feet |
| | | | | |
| Setback to Septic Tank or Holding Tank | 170 Feet | | Setback to Well | 180 Feet |
| Setback to Drain Field | 140 Feet | | | |
| Setback to Privy (Portable, Composting) | DNA Feet | | | |

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

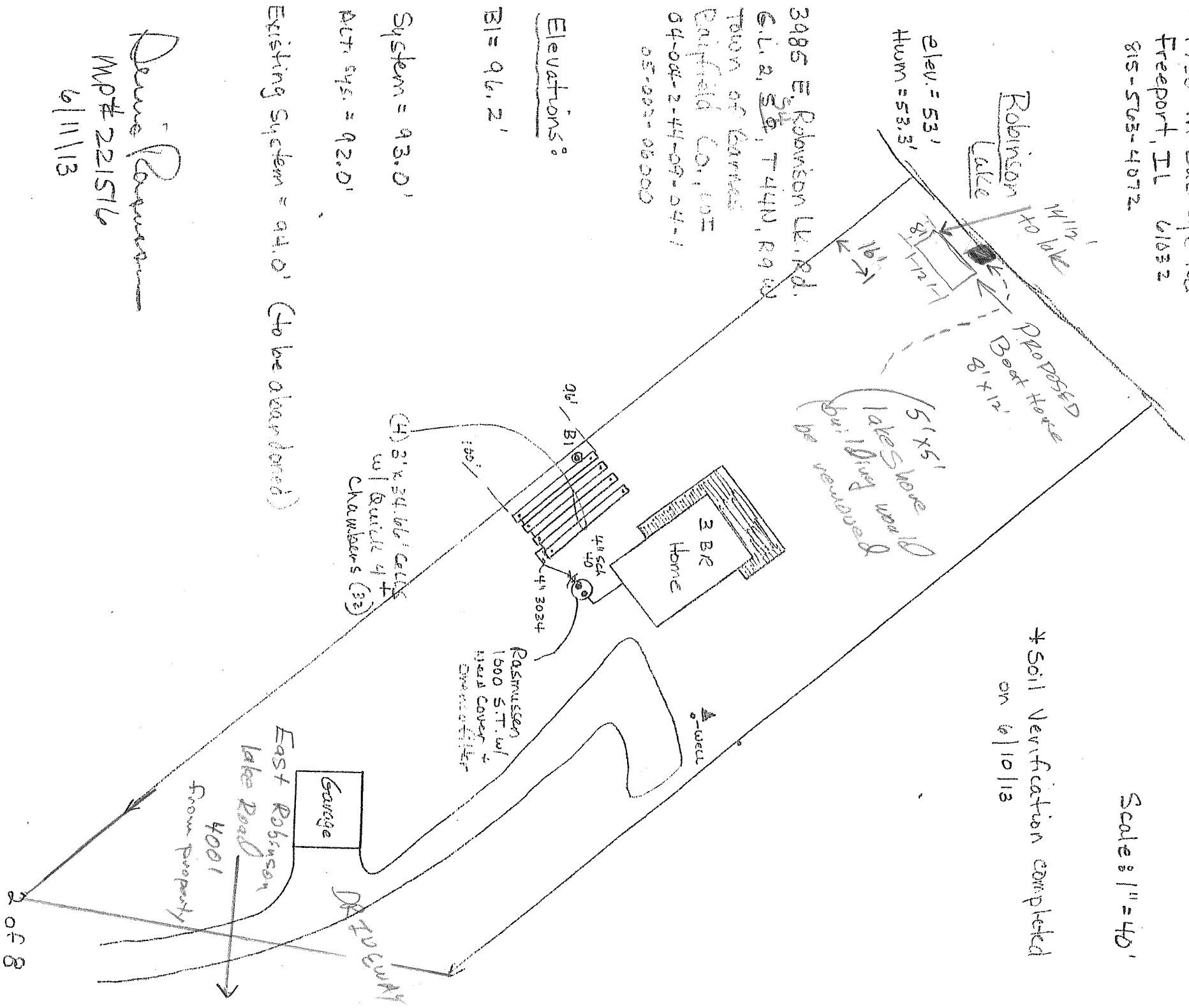
| | | | | | | | |
|--|--|---|--|---|--|---|--|
| Issuance Information (County Use Only) | | Sanitary Number: | | # of bedrooms: | | Sanitary Date: | |
| Permit Denied (Date): | | Reason for Denial: | | | | | |
| Permit #: 17-0474 | | Permit Date: 12-7-17 | | | | | |
| Is Parcel a Sub-Standard Lot | | <input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No | | Mitigation Required | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Is Parcel in Common Ownership | | <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No | | Mitigation Attached | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Is Structure Non-Conforming | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | Affidavit Required | |
| | | | | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Granted by Variance (B.O.A.) | | Previously Granted by Variance (B.O.A.) | | | | | |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Case #: | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Case #: | |
| Was Parcel Legally Created | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | Were Property Lines Represented by Owner | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Was Proposed Building Site Delineated | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | Was Property Surveyed | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Inspection Record: | | | | | | Zoning District (R-3) | |
| 11/21/17 | | | | | | Lakes Classification () | |
| Date of Inspection: Appalen | | Inspected by: 11/21/17 | | Date of Re-Inspection: | | | |
| Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.) | | | | | | | |
| Maintain Setbacks & earth toned colors | | | | | | | |
| Signature of Inspector: Appalen | | | | | | Date of Approval: 11/22/17 | |
| Hold For Sanitary: <input type="checkbox"/> _____ | | Hold For TBA: <input type="checkbox"/> _____ | | Hold For Affidavit: <input type="checkbox"/> _____ | | Hold For Fees: <input type="checkbox"/> _____ | |

Douglas N. Scheider Living Trust # 86353
 1730 W. Buckeye Rd
 Freeport, IL 61032
 815-5763-4072

N

Scale: 1" = 40'

* Soil Verification completed
 on 6/10/13



3985 E Robinson Lk. Rd.
 6.L. 2, 3rd, T44N, R9W
 Town of Lakes
 Fairfield Co., IL
 04-04-2-44-09-04-1
 05-002-06000

Elevations:

B1 = 96.2'

System = 93.0'

Alt. Sys. = 92.0'




















Existing System = 94.0' (to be abandoned)

Dave Rasmussen
 MP# 221516
 6/11/13

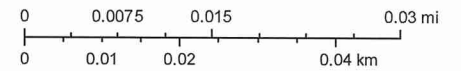
Bayfield County Web AppBuilder



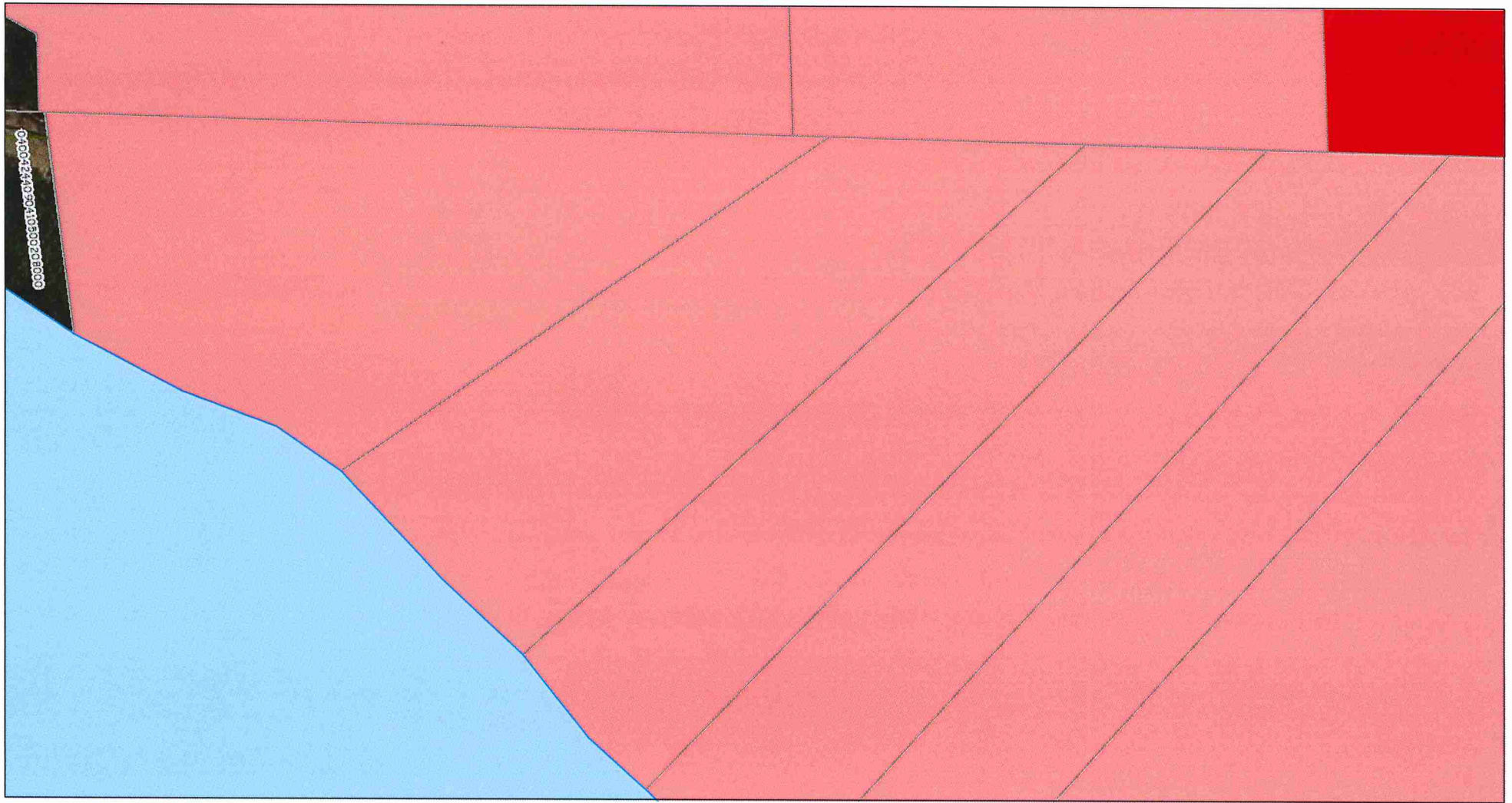
November 22, 2017

- | | | | | | | | |
|---|--|---|--------------|---|-----------------------------|---|--------------------|
|  | Buildings |  | Recorded Map |  | State |  | Tie Lines |
| Corner Tie Sheets | | All Roads | |  | Town |  | Rivers |
|  | Section Corner Monument on File |  | CFR |  | Municipal Boundary |  | Douglas Co Parcels |
|  | Section Corner Monument Referenced on Survey |  | County |  | Section Lines |  | Ashland Co Parcels |
| Survey Maps | | | |  | Approximate Parcel Boundary | | |
|  | UnRecorded Map |  | Federal |  | Meander Lines | | |
| | |  | Private | | | | |

1:626



Bayfield County Web AppBuilder



November 22, 2017

BFZoning - Zoning Districts Corner Tie Sheets

- (R1) - Residential - 1
- (R3) - Residential - 3
- Water
- + Buildings
- + Section Corner Monument on File
- + Section Corner Monument Referenced on Survey
- + Survey Maps
- + UnRecorded Map



Recorded Map

All Roads

- CFR
- County
- Federal
- Private

State

Town

Municipal Boundary

Section Lines

Approximate Parcel Boundary

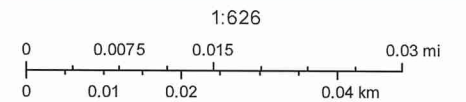
Meander Lines

Tie Lines

Rivers

Douglas Co Parcels

Ashland Co Parcels



Bayfield County Impervious Surface Calculations

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

| | | | | |
|--|------------|---|-------|-------------------------------|
| Property Owner(s): <i>Douglas N. Scheider Living Trust</i> | | | | |
| Mailing Address: <i>1730 W. Budweye Rd. Freeport IL 61032</i> | | Property Address: <i>3985 E. Robinson Lake Rd.</i> | | |
| Legal Description: 1/4, <i>NE</i> 1/4, | | Section, Township, Range Sec <i>4</i> Township <i>44</i> N, Range <i>9</i> W | | |
| Authorized Agent/Contractor | | Gov't Lot <i>2</i> | Lot # | CSM# |
| | | | | Vol & Page <i>1026/990</i> |
| Lot(s) # | Block(s) # | Subdivision | | Town of: <i>Barnes</i> |
| Parcel ID # (PIN #) <i>04-004-2-44-09-04-1 05-002-06000</i> | | Tax ID # <i>1348</i> | | Date: |

Impervious Surface: An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious. Impervious surface standards shall apply to the construction, reconstruction, expansion, replacement or relocation of any impervious surface that is or will be located within 300 feet of the ordinary high water mark of any navigable waterway on any riparian lot or parcel. Nonriparian lot or parcel that is located entirely within 300 feet of the ordinary high-water mark of any navigable waterway.

Calculation of Impervious Surface: Percentage of impervious surface shall be calculated by dividing the surface area of the existing and proposed impervious surfaces on the lot or parcel by the total surface area of that lot or parcel, and multiplying by 100. If an outlot lies between the ordinary high water mark and the developable lot or parcel described in subd. 1. and both are in common ownership, the lot or parcel and the outlot shall be considered one lot or parcel for the purposes of calculating the percentage of impervious surfaces.

Impervious Surface Standard: Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

Existing Impervious Surfaces: For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- a. Maintenance and repair all impervious surfaces:
- b. Replace existing impervious surfaces with similar surfaces within the existing building footprint;
- c. Relocate or modify existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.

| Impervious Surface Item | Dimension | Area (Square Footage) |
|--------------------------------------|--|-------------------------|
| Existing House | 31 X 41 | 1364 |
| Existing Accessory Building/Garage | 26 X 26 | 676 |
| Existing Sidewalk(s), Patio(s) | 122 X 4, 10 X 3 | 518 |
| Existing Covered Porch(s), & Deck(s) | 35" X 42" 8' X 27.3' 528.1 40" X 60" 7.25' X 5.33' less 174.6 under 44" X 96" 5' X 27.3' drive | 353.5 |
| Existing Driveway | 7 X 107.5 | 752.5 |
| Other Structures lake building | 24 59" X 59" | 24.2 * to be demolished |
| Proposed Addition/House | | |
| Proposed Accessory Building/Garage | | |
| Proposed Sidewalk(s) & Patio(s) | | |
| Proposed Covered Porch(s) & Deck(s) | | |
| Proposed Driveway | | |
| Proposed Other Structures | 8' X 12' | 96 |
| Total: | | 3784.2 |

- a. Total square footage of lot: 43,124
- b. Total impervious surface area: 3,784
- c. Percentage of impervious surface area: $100 \times (b)/a = 8.78$

If the proposed impervious surface area is greater than 15% mitigation is required.

Total square footage of additional impervious surface allowed: @ 15% _____ @ 30% _____

| | |
|---|---|
| Issuance Information (County Use Only) | Date of Inspection: <u>11/21/17</u> |
| Inspection Record: <u>Above Numbers look correct</u> | Zoning District (<u>R-3</u>) Lakes Classification (<u>2</u>) |
| Condition(s): | Stormwater Management Plan Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Signature of Inspector: <u>[Signature]</u> | Date of Approval: <u>11/22/17</u> |

TOWN OF BARNES TREASURER
JUDY BOURASSA

3360 CO HWY N
BARNES WI 54873

Phone: (715) 795-2782
E-Mail: clerk@barnes-wi.com

STATE OF WISCONSIN - BAYFIELD COUNTY
REAL ESTATE PROPERTY TAX BILL FOR 2016

DOUGLAS N SCHEIDER LIVING TRUST
TOWN OF BARNES

PAYMENTS should reference: **Tax ID: 1348**

DOCUMENT RECORDING, or anything else should reference:

PIN: 04-004-2-44-09-04-1 05-002-06000

Alternate/Legacy ID: 004-1054-02 000

Ownership: DOUGLAS N SCHEIDER LIVING TRUST

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

Property Description / Location of Property

Site Address: N/A

Description: PAR IN GOVT LOT 2 IN V.1026 P.990 TOG WITH
EASE 393I (DOUGLAS N SCHEIDER LIVING TRUST DTD
06/07/2001) IM 2005R-500977

DOUGLAS N SCHEIDER LIVING TRUST
1730W BUCKEYE RD
FREEPORT IL 61032

Please include self-addressed, stamped envelope for return receipt.
Please inform your treasurer of any billing address changes.

Acreage: 0.000

Document: 2009R-529085 1026-990

| Assessed Value | | | Average Assessment Ratio | Net Assessed Value Rate (Does NOT reflect lottery or first dollar credit) 0.009150074 | Real Estate Tax: 2,107.26 First Dollar Credit: -26.10 Lottery Credit: -0.00 Net Real Estate Tax: 2,081.16 Total Due: 2,081.16 |
|------------------------------------|-----------------|----------------|--|---|--|
| <u>Land</u> | <u>Improved</u> | <u>Total</u> | | | |
| \$108,100 | \$122,200 | \$230,300 | 1.00040 | | |
| Estimated Fair Market Value | | | An "X" means unpaid prior year taxes. <input type="checkbox"/> | School taxes reduced by school levy tax credit. \$163.63 | For full payment pay to TOWN OF BARNES treasurer by January 31, 2017 |
| <u>Land</u> | <u>Improved</u> | <u>Total</u> | | | |
| \$108,100 | \$122,200 | \$230,300 | | | |
| Estimated State Aids | | | | | |
| Allocated Tax District | | | Net Tax | | % Tax Change |
| Taxing Jurisdiction | 2015 | 2016 | 2015 | 2016 | |
| STATE | 0 | 0 | 36.28 | 39.07 | 7.7 |
| COUNTY | 79,629 | 86,751 | 823.18 | 886.90 | 7.7 |
| TOWN OF BARNES | 338,195 | 338,191 | 352.38 | 361.12 | 2.5 |
| SCHL-DRUMMOND | 137,471 | 163,207 | 703.34 | 733.24 | 4.3 |
| TECHNICAL COLLEGE | 286,642 | 296,626 | 79.89 | 86.93 | 8.8 |
| Totals | 841,937 | 884,775 | 1,995.07 | 2,107.26 | 5.6 |
| First Dollar Credit | | | 26.32 | 26.10 | -0.8 |
| Lottery & Gaming Credit | | | 0.00 | 0.00 | 0.0 |
| Net Property Tax | | | 1,968.75 | 2,081.16 | 5.7 |

Warning If not paid by due dates, installment option is lost and total tax is delinquent and subject to interest and if applicable, penalty. (See reverse)

Pay 1st Installment Of: **1,040.58** Pay 2nd Installment Of: **1,040.58**
by January 31, 2017 by July 31, 2017

Amount enclosed: _____ Amount enclosed: _____
DOUGLAS N SCHEIDER LIVING TRUS **DOUGLAS N SCHEIDER LIVING TRUS**



Make check payable and mail to:
TOWN OF BARNES TREASURER
JUDY BOURASSA
3360 CO HWY N
BARNES WI 54873

Include this stub with your payment



Make check payable and mail to:
BAYFIELD COUNTY TREASURER
DANIEL ANDERSON
PO BOX 397
WASHBURN WI 54891

Include this stub with your payment







Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0474** Issued To: **Douglas Scheider**

Location: - ¼ of - ¼ Section **4** Township **44** N. Range **9** W. Town of **Barnes**

Par in

Gov't Lot **2** Lot Block Subdivision CSM#

For: **Residential Other: [1- Story; Boathouse (8' x 12') = 96 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): **Maintain setbacks and earth toned colors.**

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.
This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

December 7, 2017

Date